

STATE/COUNTY TEAM MEETING
NOTES FROM CONVERSATION ABOUT YOUTH WITH COMPLEX NEEDS
6/22/17

Below are the chart notes from the discussion that was held among state agencies, county representatives, and providers in response to hearing about specific case experiences from five counties:

IS THIS A YOUTH THAT STRTP'S WERE DEVELOPED FOR?

- *May or may not → dependent on the Service array*

WHAT IS NEEDED FROM THE PLACING AGENCY?

- *Possibly need a more independent placement – with services*
- *Flexibility of where to stay*
 - *With ability to staff up*
 - *Therapist – services that can stay with the child/youth*
- *Need to focus on the youth's goal – but this is a **shared responsibility** with MH, Provider, Family & transitional age youth*
- *In-home with support – 1 on 1 supervision*
- *Put focus on “place to stay”*
 - *with supports & services*
 - *Relational based treatment with families engaged*
- *Work with Provider organizations*

WHAT IS NEEDED FROM MENTAL HEALTH?

- *Accurate diagnoses*
- *Therapists who can remain on the service team*
- *Include families in the treatment*
- *Relational based, authentically trauma-informed treatment*
- *Stabilization services*
- *MDT → at psychiatric hospitals so that discharges can be well planned*
- *Substance Abuse Treatment for youth*

WHAT IS NEEDED FROM PROVIDERS?

- *Appropriately staffed programs – 2 to 1*
- *Staff authentically trained and consistently coached in trauma informed relationally based treatment – program*
- *Look at youth through a trauma-informed lens*

- *Look at youth from a Strength Based view; for example-- sibling relationships might be a connector – focus on relationships*
- *Engage families → children and youth often become alienated from family/parents and can exhibit behaviors that are aggressive*
- *Out-of-State placements → willing to take these youth and take the risk for staff and program → staff are more flexible*
- *Consistent training approach across the State (See pending Integrated Training Plan)*
- *Places – home for youth who need a place to live with services and supports*
- *Specialized Provider Type – such as*
 - *Developmentally Delayed with MH diagnoses*
 - *Commercially Exploited*
- *Begin with “Yes” → what else is needed to provide for this youth*
 - *Not be afraid of the “history”*
- *Ability to stabilize the youth immediately –(TBS, etc.)*
- *Organizations understand their role in providing for these youth*
 - *Training of staff in new approaches (trauma informed, etc.)*
- *Providers who can take youth with Substance Abuse issues*
- *Maybe different model → Home Model? The Mockingbird model that some out of state programs are implementing that will take High Needs Youth*
- *Homes for LGBTQ youth – placements sensitive to their needs*
- *More Secure → but short of locked such as Staffing at doors; high fences around the property*

WHAT IS NEEDED FROM THE STATE?

- *CCL regulations that address issues of AWOL youth including CSEC Youth*
 - *More Secure*
- *Specialized Programs – Specialized for DD & MH – Licensing & Program*
- *Trauma-informed CCL practices*
- *Look at how No Reject/Eject policies and practices can be enforced*
- *Create a forum for discussions with Regional Centers*
- *ACIN on Best Practice Trauma Informed training*
- *Explore/clarify the All County Funding issues for individualized placements counties are creating for youth with complex needs*
- *Look at what other States are doing for placements for youth with complex needs*

WHAT ARE SYSTEM ISSUES?

- *Develop placement capacity for stabilizing youth with complex needs that have had multiple placement failures*

- *Financial → how can these placements be funded through access to Fed and other sources*
- *Creating 45 Day Assessment Center/Appropriate Diagnostic and Stabilization Services*
- *IEP is an issue – when youth leave placement the IEP is no longer valid*

NEXT STEPS

- **Follow up today's scenario with discussion/presentation of what has worked for youth with complex needs**
- **Bring youth/families into the conversation**
- **Have future meeting with Regional Center – to focus on need for placements and services to address dual diagnoses youth (DD & MH)**
- **Consider intersecting with Seneca's Irvine Foundation policy forum to bring this level of concrete discussion into that conversation**